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## **COVER LETTER**

Div	ision of Cor	porations				
SUBJECT:	Fountainhead Properties of FL, LLC					
oomber.		Name of Limited Liability Company				
The enclosed	d Articles of A	Amendment and fee(s) are sub-	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		David Durell, MGRM				
		<del></del>	Name of Person	<del></del>		
		Fountainhead Properties	s of FL, LLC			
	<del></del>					
		1755 Ashton Abbey Roa	d			
			Address	<del></del>		
		Clearwater, FL 33755				
		davedurell@gmail.com	City/State and Zip Code			
		E-mail address: (t	to be used for future annual report notifi	cation)		
For further i	nformation co	oncerning this matter, please ca	all:			
David Dure	ell		727 580-2835			
	Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is a	a check for th	e following amount:				
■ \$25.00 F	filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		

MAILING ADDRESS:

Registration Section

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Fountainhead Properties of FL, LLC		
( <u>Name of the Limited Liabili</u> (A Florid	ity Company as it now appears on our records.  a Limited Liability Company)	)
	Company were filed on 10/03/2006	and assigned
Florida document number L06000096412	<u></u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		DIV.
(Principal office address MUST BE A STREET ADD)	RESS)	SE SECH
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Enter now mailing address if applicables		<b>2</b> 200 €
		<del> </del>
Mading address MAT BE A POST OFFICE BOX)		- 28 Kg
		enter the name of the r
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		rida Zip Code
amendment is submitted to amend the following:  f amending name, enter the new name of the limited liability company here:  new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbrer new principal offices address, if applicable:  ncipal office address MUST BE A STREET ADDRESS)  er new mailing address, if applicable:  illing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the stered agent and/or the new registered office address here:  Name of New Registered Agent:	Zip Code	

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Patricia A. Durell	1755 Ashton Abbey Road Clearwater FL 33755	<b></b>
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fective date, if other than the	date of filing:			(optional)	1	
in effective date is listed, the date must ote: If the date inserted in this blo cument's effective date on the De	t be specific and cannot be ock does not meet the a	pplicable stat		90 days after filing	.) Pursuant to	
record specifies a delayed		t not an ef	fective time, a	at 12:01 a.m.	on the ea	rlier
The 90th day after the reco	ord is filed.	/				
September 12,	2018		////	11/1/20		
			T/ / //			

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Typed or printed name of signee

Filing Fee: \$25.00